

## **HEALTH AND SENIOR SERVICES**

### **PUBLIC HEALTH COUNCIL**

#### **Public Health Practice Standards of Performance for Local Boards of Health in New Jersey Public Health Staffing Qualifications: Environmental Health**

#### **Proposed Amendments: N.J.A.C. 8:52-4.2 and 8:52 Appendix Proposed New Rules: N.J.A.C. 8:52-7A**

Authorized By: Clifton R. Lacy, M.D., Commissioner, Department of Health and Senior Services  
and The Public Health Counsel, Robert Pallay, M.D., Chairperson

Authority: N.J.S.A. 26:1A-15 and 26:3A2-1 et seq.

Calendar Reference: See "Summary" below for explanation of exception to the calendar requirement.

Proposal Number: PRN 2003 - 437

A **public hearing** concerning this proposal will be held on Monday, December 8, 2003 at 2 p.m. at :

New Jersey Department of Health and Senior Services  
John Fitch Plaza  
First Floor Auditorium  
Trenton, New Jersey

Submit written comments by January 2, 2004 to:

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#### **The agency proposal follows:**

#### **Summary**

Standards of Performance for Local Boards of Health in New Jersey became effective prior to September 1, 1969, as Chapter 51, Recognized Public Health Activities and Minimum Standards of Performance for Local Boards of Health in New Jersey. Chapter 51 was repealed and new rules on the subject were adopted at Chapter 52 by R. 1986 d. 476, effective December 15, 1986 (operative January 1, 1987). See 18 N.J.R. 1690 (a) and 2448 (a). Chapter 52 was readopted without change as R.1992 d. 24, effective December 11, 1991. See N.J.R. 2528 (a) and 24 N.J.R. 144 (a). Chapter 52 was again readopted without change as R.1997 d.6, effective December 10, 1996. See 28 N.J.R. 4200 (a) and 29 N.J.R. 129 (a). Chapter 52 expired on December 10, 2001 and new rules were adopted as R. 2003 d. 51, effective February 18, 2003. See 34 N.J.R. 241 (a) and 35 N.J.R. 1083 (a).

Prior to the adoption of the new rules on February 18, 2003, the existing rules had not been changed in substance since 1986. As such, the February 18, 2003 rules represent a major initiative to modernize New Jersey's local public health system.

During the adoption process of the new rules, the Public Health Council advised the Department of Health and Senior Services that provisions in N.J.A.C. 8:52-4.2 (d) 2 and (i) 2, requiring a Health Educator to obtain certification as a Certified Health Education Specialist (CHES), needed to be reconsidered because they impacted the nursing profession and the profession's continuing role in the practice of health education. It was the Council's position that formal training of professional registered nurses included and was preparatory for the practice of health education. At that time, the Public Health Council agreed to pass the rules with the understanding that the Department would meet with appropriate parties representing health education and nursing to further examine the issue, report back to the Public Health Council within 90 to 120 days of the effective date of the rules, and make all necessary changes to the rules through subsequent rulemaking.

The Department has hosted a meeting of all interested parties including representatives of the Public Health Council, the New Jersey Association of Public Health Nurse Administrators, the New Jersey State Nurses Association, the New Jersey Board of Nursing, the National Society for Public Health Education, and the New Jersey Society for Public Health Education; and attended and gave informal testimony on the subject to the Education Subcommittee of the Board of Nursing in an effort to identify a suitable solution through a consensus process.

Notwithstanding everyone's best efforts, a consensus that addressed all the interested parties issues could not be reached. Nevertheless, through information obtained in this deliberative process, the Department determined that a baccalaureate degree registered professional nurse who is not credentialed as a Certified Health Education Specialist (CHES) can qualify as a health educator if he or she is certified as a Community Nurse through the national credentialing standards of the American Nurses Credentialing Center (ANCC). This alternative to CHES would not apply to public health professionals that are not baccalaureate degree registered professional nurses. The Department believes this alternative serves to allow the CHES certification to remain in place and continue to serve as one of the gold standards as the Department "raises the bar" for public health practice in this State and it also respects the critical importance, formal training, and professional credentialing system pertaining to nurses in public health practice. As the Department continually strives to set evidenced-based public health policy, the Department will be conducting an assessment of the impact of allowing both CHES and ANCC credentials for Health Educators and Directors of Health Education within 24 months of the adoption of these rules, should that be the outcome. The Public Health Council concurs with the Department's approach regarding the revision of this rule. The Department's findings will be reported back to the Public Health Council and any necessary changes to the rules identified through this process will be proposed in future rulemaking.

Additionally, during the public comment period for N.J.A.C. 8:52 that expired on February 6, 2002, several comments, outlined below, were provided that also warrant a timely evaluation and response by the Department resulting in several other rules changes that are being proposed in this amendments.

Several commenters stated that some of the education and experience requirements specified in N.J.A.C. 8:52-4.2, Public health staffing qualifications, did not agree with existing job specifications for these titles. At that time, the Department was already in the process of working with the Department of Personnel (DOP) to make necessary changes. The Department made the commitment to continue to examine all the titles specified in the rules for consistency with DOP job specifications. During this process, it was determined that in addition to changing the existing DOP job specifications to agree with the rules, requirements in the rules at N.J.A.C. 8:52 4.2 (f), information technologist/computer specialist and N.J.A.C. 8:52 4.2 (m), public health nursing supervisor, needed to be changed to be consistent with the DOP

title series for public health nurse and network administrator. Consequently, this rule proposal changes the number of years of experience for the public health nursing supervisor at N.J.A.C. 8:52 4.2 (m) from three to four years and it allows work experience or course work at an accredited institution to be substituted for years of college or college credits at N.J.A.C. 8:52 4.2(f) for the information technologist.

Several commenters, including the New Jersey Environmental Health Association (NJEHA), stated that the rules were not complete unless all the environmental health related functions of local health departments were defined and incorporated into the rules as a subchapter similar to that of the public health education and public health nursing subchapters at N.J.A.C. 8:52- 6 and 7, respectively. Upon consideration of this comment, the Department agreed and met with members of the NJEHA and developed the new subchapter. Since all environmental health responsibilities are already specified in statute and/or regulations, this new subchapter is not considered an expansion of the rules but rather a clarification that provides for the centralization of requirements for environmental health into one subchapter in the rules. It was considered most appropriate for the new subchapter to be placed right after the subchapters for health education and public health nursing or Subchapters 6 and 7, respectively. Therefore, this new subchapter appears in these rules as N.J.A.C. 8:52- 7A, Environmental Health.

Also identified during the public comment period were two places in the Appendix where the rules did not agree with current practices. Consequently, in the Appendix under “Infants and preschool children,” the reporting frequency for the Department's Child Health Service Report has been changed from monthly to quarterly and under “Immunization,” surveys and audit frequencies have been changed from every three years to every year.

No other amendments to the rules are being made at this time. The Department will continue to examine changes to the rules that were suggested and responded favorably to in the final adoption of N.J.A.C. 8:52 that appeared in the February 18, 2003 New Jersey Register.

As the Department has provided a 60-day comment period for this notice of proposal, this notice is excepted from the rulemaking calendar requirement, pursuant to N.J.A.C. 1:30-3.3(a)5.

### **Social Impact**

The proposed amendments to and new rules at, N.J.A.C. 8:52 will have a beneficial impact on all residents in New Jersey insofar as they will continue to build the necessary public health infrastructure and capacity needed to protect their health.

Besides the public, affected entities will include New Jersey's 114 local health agencies, more than 500 local boards of health, and local governmental public health professionals especially public health nurses, health educators and information technologists. The proposed amendments and new rule will benefit them by continuing to raise the standard of professionalism and expertise commensurate with the demands of a modern public health system.

### **Economic Impact**

The proposed amendments to and new rules at N.J.A.C. 8:52 will not impose any financial requirement on local boards of health since it does not impose any additional requirements from the final rules adopted on February 18, 2003. Rather the amendments and new rules are proposed to align the rules with current practices and to clarify environmental health roles and responsibilities for local health agencies.

### **Federal Standards Statement**

The proposed amendments to and new rules at N.J.A.C. 8:52 are not proposed under the authority of, or in order to implement, comply with, or participate in any program established under Federal law, or under a state statute that exceeds, incorporates or refers to Federal law, Federal standards, or Federal guidelines.

### **Jobs Impact**

The proposed amendments and new rules at N.J.A.C. 8:52 are not expected to increase or decrease the number of jobs in the State.

### **Agriculture Industry Impact**

The proposed amendments and new rules at N.J.A.C. 8:52 will not have any impact on the agriculture industry in New Jersey.

### **Regulatory Flexibility Statement**

A regulatory flexibility analysis is not required because the proposed amendments to and new rules at N.J.A.C. 8:52 does not impose reporting, record keeping or other compliance requirements on small businesses, as defined by the Regulatory Flexibility Act, N.J.S.A. 52:15b-16 et seq. Because these rules apply only to local boards of health and local health agencies, which represent municipal governments, the rules will not have any effect upon small businesses or private industry in general. The rules do provide for voluntary participation of private and voluntary organizations in community partnerships and the community health improvement planning process. Organizations that participate in the process may need to keep nominal records and may need to attend meetings.

### **Smart Growth Impact Statement**

The proposed amendments and new rules would have no impact on the achievement of smart growth or implementation of the State Development and Redevelopment Plan.

Full text [of the proposal follows amendment follows (additions indicated in boldface) thus; [deletions indicated in brackets [ thus ] )]:

8:52-4.2 Public health staffing qualifications

(a) - (c) (No change)

(d) Each health educator shall have the following qualifications:

1. (No change)

2. Meet national credentialing standards of the profession as a Certified Health Education Specialist (CHES), **or if a baccalaureate degree registered nurse, meet national credentialing standards of the American Nurses Credentialing Center (ANCC) as a Community Health Nurse.** Specifically exempted from this requirement is any individual who holds this position prior to February 18, 2003; and

3. (No change)

(e) (No change)

(f) Each information technologist/computer specialist shall have the following qualifications:

1. Hold a baccalaureate degree from an accredited college or university [;and] **with a minimum of eighteen (18) semester hour credits in mathematics and/or computer science; and have a minimum of three years experience in computer programming, information system design, and systems analysis. The experience shall have included responsibility for the development, maintenance and implementation of a moderate sized server-based multi-network, multi-user Local Area Network (LAN), Metropolitan Area Network (MAN) and/or Wide Area Network (WAN) of about 20 end users, or**

2. [Have a minimum of three years experience in computer programming, information system design, and systems analysis. The experience shall have included responsibility for the development and implementation of a moderate sized server-based local area network of about 20 end users.] **Possess 18 semester hour credits in mathematics and/or computer science, and**

i. **Have college credits equivalent to a baccalaureate degree or experience on a year-for-year basis where one year of appropriate experience may be substituted for 30 semester hour credits. The experience shall be related to the development, implementation and maintenance of multi-network, multi-user Local Area Network (LAN), Metropolitan Area Network (MAN) and/or Wide Area Network (WAN) environments.**

**(1) Evidence of formal training in computer science/ information technology received at an accredited institution for equivalency to college courses may be submitted for evaluation for possible credit on a case-by-case basis and in accordance with New Jersey Department of Personnel criteria; and**

ii. **Have an additional three years experience in computer programming, information system design, and systems analysis. The experience shall include responsibility for the development, implementation and maintenance of a moderate sized server-based multi-network, multi-user Local Area Network (LAN), Metropolitan Area**

**Network (MAN) and/or Wide Area Network (WAN) environments of about 20 end users.**

(g) - (h) (No change)

(i) Each director of health education shall have the following qualifications:

1. (No change)

2. Meet national credentialing standards as a Certified Health Education Specialist (CHES), **or if a baccalaureate degree registered nurse, meet national credentialing standards of the American Nurses Credentialing Center (ANCC) as a Community Health Nurse.** Specifically exempted from the requirement is any individual who holds this position prior to February 18, 2003; and

3. (No change)

(j)-(l) (No change)

(m) Each public health nursing supervisor shall have the following qualifications:

1-2. (No change)

3. Have a minimum of [three] **four** years of experience as a public health nurse.

## **SUBCHAPTER 7A. ENVIRONMENTAL HEALTH**

### **8:52-7A.1 Scope and purpose**

**This subchapter addresses the protection against and prevention of environmental factors that may adversely impact human health or the ecological balances essential to sustained human health and environmental quality, whether in the natural or man-made environment. Environmental health practice refers to those aspects of human health that are determined by physical, chemical, biological, social and psychosocial factors in the environment. It also refers to the theory and practice of assessing, correcting, controlling and preventing those factors in the environment that can potentially adversely affect the health of humans.**

### **8:52-7A.2 Environmental health services**

**(a) Each local health agency shall provide a comprehensive environmental health program that is developed and overseen by a Registered Environmental Health Specialist .**

**(b) Each local health agency shall provide an environmental health program that is developed in accordance with the State Sanitary Code and other various codes and regulations as applicable. The local health agency, through the activities of a licensed Registered Environmental Health Specialist(s), shall assure compliance with said regulations.**

**(c) Each local health agency shall ensure that environmental health services provide the core public health functions and the delivery of the “10 essential health services” at N.J.A.C. 8:52-3.2(a)1 through 10. These services shall be developed and overseen by a licensed Registered Environmental Health Specialist and shall include, but not be limited to:**

- 1. Assessing environmental health risks to and influences on humans and the environment;**
- 2. Utilizing discrete data and epidemiological methods, as applicable, to determine the etiology of, and recommend corrective actions for, diseases spread through humans, animals and the environmental media of air, soil, water and food.**
- 3. Providing professional and technical support to local, State and Federal agencies on matters**

within their expertise.

4. Developing and implementing a proactive environmental health program in an effort to preclude health threats to the public;
5. Reviewing plans for residential, commercial and industrial development as necessary to ensure health and safety code compliance;
6. Collection of water, food and other specimens as needed for laboratory analysis, and interpretation of the results of same;
7. Planning and performing routine and emergency environmental health inspections and investigations to ensure operator or owner conformance with established regulations;
8. Maintaining, updating and analyzing environmental health records, inspection findings and other data to ensure proper documentation and continuity of environmental health protection;
9. Preparing reports and findings as witness to environmental health violations in court cases and hearings;
10. Advocating for local and state policy that protects the public's health and safety;
11. Reviewing new environmental health policy and implementing the requirements of new policies as necessary;
12. Educating and communicating environmental risks to the public, media and other interested parties;
13. Assisting the public, local health agency personnel and other officials with recommendations and resources on various environmental health matters per code requirements and suitable abatement practices;
14. Investigating foodborne, airborne, waterborne and other suspected disease outbreaks as required; and
15. Maintaining the most current knowledge of environmental health technologies, information systems and technical advancements in the field;

(d) Each local health agency shall ensure the coordination of environmental health services that are delivered by all agencies in their jurisdiction as described in the Community Health Improvement Plan. This objective shall be met in an effort to identify gaps, reduce duplication and assure continuity of environmental health services.

## APPENDIX

### PROGRAMMATIC GUIDELINES FOR BEST PRACTICES

#### I. (No change )

#### II. Communicable Disease Activities

##### Immunization

(a) The local board of health shall promote and provide immunizations for protection against childhood vaccine-preventable diseases and shall:

#### 1. (No change)

2. Assist all schools, with an emphasis on preschool facilities, in implementing and enforcing the immunization requirements contained in chapter 14, of the State Sanitary Code (N.J.A.C. 8:57-4) by providing immunization services and conducting periodic surveys and representative record audits every [three] year[s];

#### 3.-4. (No change)

### III. Maternal and Child Health Activities

#### Infants and preschool children

(a) The local board of health shall provide health supervision for infants and preschool children and shall:

1. (No change)
2. Prepare a Child Health Service Report CH-7 or subsequent form number for each session, and submit promptly on at least a [monthly] **quarterly** basis to the Maternal and Child Health Program in the New Jersey Department of Health and Senior Services;

3.-4. (No change)

4. (No change)

**IV.-V** (No change)